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### LOBBYING REPORT

Lobbying Disclosure Act of 1995 (Section 5) - All Filers Are Required To Complete This Page

1. Registrant Name <u>Robert Betz Associates, Inc</u>	
2. Address <input type="checkbox"/> Check if different than previously reported <u>1444 Eye Street NW Suite 410 Washington, DC 20005</u>	
3. Principal Place of Business (if different from line 2) City: _____ State/Zip (or Country): _____	
4. Contact Name <u>Cathy Clark Betz</u>	Telephone <u>(202) 3471990</u>
E-mail (optional)	5. Senate ID # <u>6121-48</u>
7. Client Name <input type="checkbox"/> Self <u>Health Industry Group Purchasing Association</u>	6. House ID # <u>32456003</u>

TYPE OF REPORT 8. Year 2000 Midyear (January 1-June 30)  OR Year End (July 1-December 31)

9. Check if this filing amends a previously filed version of this report

10. Check if this is a Termination Report  ⇨ Termination Date \_\_\_\_\_ 11. No Lobbying Activity

INCOME OR EXPENSES - Complete Either Line 12 OR Line 13	
<p><b>12. Lobbying Firms</b></p> <p>INCOME relating to lobbying activities for this reporting period was:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ <u>\$ 20,000</u> Income (nearest \$20,000)</p> <p>Provide a good faith estimate, rounded to the nearest \$20,000, of all lobbying related income from the client (including all payments to the registrant by any other entity for lobbying activities on behalf of the client).</p>	<p><b>13. Organizations</b></p> <p>EXPENSES relating to lobbying activities for this reporting period were:</p> <p>Less than \$10,000 <input type="checkbox"/></p> <p>\$10,000 or more <input checked="" type="checkbox"/> ⇨ \$ _____ Expenses (nearest \$20,000)</p> <p><b>14. REPORTING METHOD.</b> Check box to indicate expense accounting method. See instructions for description of options.</p> <p><input checked="" type="checkbox"/> Method A. Reporting amounts using LDA definitions only</p> <p><input type="checkbox"/> Method B. Reporting amounts under section 6033(b)(8) of the Internal Revenue Code</p> <p><input type="checkbox"/> Method C. Reporting amounts under section 162(e) of the Internal Revenue Code</p>

Signature Cathy Clark Betz

Printed Name and Title Cathy Clark Betz, Counsel

Registrant Name Robert Betz Associates Client Name Health Industry Group Purchasing Assn

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code GOV (one per page)

16. Specific lobbying issues  
P.L. 106-387, Agriculture, Rural Development, FDA and Related Agencies Appropriations Act 2001; reimbursement program

17. House(s) of Congress and Federal agencies contacted  Check if None  
U.S. House of Representatives  
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)	New
<u>Robert Betz</u>	<u>President</u>	<input type="checkbox"/>
<u>Cathy Clark Betz</u>	<u>Executive Health Counsel</u>	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None

Signature Cathy Clark Betz Date 2-7-01

Printed Name and Title Cathy Clark Betz, Counsel

Registrant Name Robert Betz Associates Client Name Health Industry Group Purchasing Assn

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code PHA (one per page)

16. Specific lobbying issues

P.L. 106-430, Needlestick Safety and Prevention Act

17. House(s) of Congress and Federal agencies contacted

Check if None

U.S. House of Representatives  
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)	New
<u>Robert Betz</u>	<u>President</u>	<input type="checkbox"/>
<u>Cathy Clark Betz</u>	<u>Executive Health Counsel</u>	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above

Check if None

Signature Cathy Clark Betz Date 2-7-01

Printed Name and Title Cathy Clark Betz

Registrant Name Robert Betz Associates Client Name Health Industry Group Purchasing Ass'n

**LOBBYING ACTIVITY.** Select as many codes as necessary to reflect the general issue areas in which the registrant engaged in lobbying on behalf of the client during the reporting period. Using a separate page for each code, provide information as requested. Attach additional page(s) as needed.

15. General issue area code MMM (one per page)

16. Specific lobbying issues

P.L. 106-554, Dept. of Labor, Health and Human Services, Education and Related Agencies Appropriations Act 2001

17. House(s) of Congress and Federal agencies contacted  Check if None

U.S. House of Representatives  
U.S. Senate

18. Name of each individual who acted as a lobbyist in this issue area

Name	Covered Official Position (if applicable)	New
<u>Robert Betz</u>	<u>President</u>	<input type="checkbox"/>
<u>Cathy Clark Betz</u>	<u>Executive Health Counsel</u>	<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>
		<input type="checkbox"/>

19. Interest of each foreign entity in the specific issues listed on line 16 above  Check if None

Signature Cathy Clark Betz Date 2-7-01

Printed Name and Title Cathy Clark Betz, Counsel